The Survey-Readiness Checklist for Administrators

What to have producible before the surveyor walks in, organized by the seven elements of an effective compliance program.

A CareCompli resource for skilled nursing and assisted living facilities

How to use this checklist

Surveys are won in the months before anyone knocks. When a surveyor or auditor asks for documentation, the difference between a clean visit and a finding is often not whether the work was done, but whether it can be produced quickly, completely, and in order. Use this checklist to test your facility's readiness. Every item is something a reviewer can ask for. If producing any of them would take more than a day, that item is a gap.

Element 1: Written policies, procedures, and standards of conduct

- ☐ Current compliance policies and procedures, with revision dates, reflecting current federal and state requirements
- ☐ A code of conduct distributed to all staff
- ☐ Records showing staff received and acknowledged the current versions, not an older edition
- ☐ Evidence policies are reviewed and updated on a schedule, not only after incidents

Element 2: Compliance officer and compliance committee

- ☐ The name of your designated compliance officer, and documentation of the designation
- ☐ A compliance committee roster with roles
- ☐ Committee meeting minutes for the past year, showing real agenda items and follow-ups
- ☐ Evidence of compliance reporting to the governing body, with dates

Element 3: Training and education

- ☐ Completion records for compliance training, by staff member and role, for the current period
- ☐ New-hire compliance training records showing training occurred at onboarding
- ☐ The training content itself, current and role-appropriate
- ☐ Records of retraining after any incident, audit finding, or policy change that called for it

Element 4: Effective lines of communication

- ☐ The hotline or reporting channel number, and proof staff know it (postings, handbook, training)
- ☐ An anonymous reporting option
- ☐ A log showing reports received and what happened to each one
- ☐ Your anti-retaliation policy, and staff acknowledgment of it

Element 5: Auditing and monitoring

- ☐ Your audit schedule for the year, and evidence audits actually ran on it
- ☐ Completed audit results for high-risk areas (billing integrity, privacy, reporting obligations)
- ☐ An annual compliance program effectiveness review
- ☐ Evidence that audit findings led to corrective action, not just a filed report

Element 6: Well-publicized disciplinary standards

- [ ] Disciplinary standards for compliance violations, in writing, in your policies
- [ ] Evidence staff were informed of them (training content, handbook)
- [ ] Records showing standards have been applied consistently across roles and levels

Element 7: Responding to detected offenses and corrective action

- [ ] Investigation files for reported concerns: intake, steps taken, findings, resolution, dates
- [ ] Corrective action plans with owners, deadlines, and completion evidence
- [ ] Documentation of any required reporting to state or federal agencies, within required timeframes
- [ ] Evidence that root causes were addressed, not only the immediate incident

State note: Reporting windows, mandated policies, and several documentation requirements above differ by state and provider type. Treat this checklist as the federal floor; know where your state raises it.

How did you do?: *Every unchecked box is a place to start. If several of them would take your team more than a day to produce, that is exactly the problem CareCompli was built to solve: one system where all of this already lives, current and producible on demand.*

How CareCompli answers this

Every item on this checklist is a report, a record, or a tracked process inside one system.

What this document asks of you	In the CareCompli portal
Policies with versions and acknowledgments	Policies live in the portal with version history and per-person acknowledgment tracking; who has seen the current version is a live report.
Committee minutes and board reporting	Committee follow-ups are tracked tasks; board-ready reporting is generated from the same records and acknowledged by emailed link.
Training completion by role	Training runs through the portal with automatic assignment, quizzes, reminders, and a completion picture by facility and role.
A complete hotline log	Every report creates its own numbered matter automatically, tracked from intake to resolution.
Audits that lead to corrective action	Audit findings convert directly into corrective action plans with owners, deadlines, and automatic reminders.
Agency reporting within deadlines	Reporting deadlines are computed the moment a matter is entered, from the applicable federal and state rules.
Produce three years of documentation	It is a report, not a fire drill.

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